

FDRE EDUCATION AND TRAINING AUTHORITY

Institutional Quality Audit Standard for Higher Education Institutions

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PREAMBLE

In recent years, Ethiopia has experienced significant growth in its higher education sector, driven by both public investment and private sector participation. This expansion has underscored the need for robust quality assurance mechanisms to maintain and improve educational standards. In response, the Ethiopian government established HERQA in 2003 to oversee quality assurance across public and private higher education institutions, with the evolving landscape of higher education, HERQA transformed into ETA through Proclamation No. 1263/2021, with its powers and duties further detailed in Regulation No. 515/2022.

ETA has redefined the processes of licensing, auditing, and accrediting HEIs, demonstrating a commitment to a more rigorous and integrated quality assurance system. The purpose of the institutional quality audit is to ensure that HEIs adhere to high-quality standards, align with national priorities, and continuously improve their systems and processes. This commitment aims to provide quality education that meets the needs of students, the labor market, and broader society.

The *Quality Audit Standard for HEIs* document outlines the framework, standards, and guidelines for conducting institutional quality audit in Ethiopia. The institutional quality audit assesses the effectiveness of internal quality assurance systems in achieving institutional objectives, compliance with ETA's requirements, and alignment with both national and international quality standards. This document serves as a critical tool for ETA in fostering continuous improvement, promoting accountability, and ensuring transparency in higher education. By evaluating HEIs through the lens of fitness for purpose and fitness of purpose, ETA aims to build trust among stakeholders and facilitate the development of educational institutions that meet both national goals and global benchmarks.



ACRONYMS

ADRI: Approach, Deployment, Result and Improvement

CPD: Continuous Professional Development

EIC: Entrepreneurship and Innovation Center

EQA: External Quality Assurance

ETA: Education and Training Authority

FFP: Fitness for Purpose

FOP: Fitness of Purpose

HEI: Higher Education Institution

HEP: Higher Education Proclamation

HERQA: Higher Education Relevance and Quality Agency

HRM: Human Resource Management

ILRM: Infrastructure and Learning Resources Management

IPR Intellectual Property Right

IQAS Internal Quality Assurance System

KPI: Key Performance Indicator

SIMS: Students Information Management system

SME Small and Medium-sized Enterprises

TVET: Technical and Vocational Education and Training



Definition of Terms

Approach: is the first dimension of the ADRI cycle, which focuses on evaluating what the HEI aims to achieve for a given topic and how it proposes to achieve it.

Commendations: refers to findings from ETA's quality audits that highlight an institution's strengths in its quality assurance system, recognizing exemplary practices, achievements, or outcomes that exceed the standards' requirements.

Deployment: refers to the second dimension of the ADRI cycle, which focuses on whether a HEI's plans for a given topic are being followed in practice, and if not, why not.

Fitness for purpose: refers to a quality assurance approach that evaluates how effectively an HEI or its programs meet the institution's stated objectives, such as its mission, vision, and strategic goals.

Fitness of purpose: refers to a quality assurance approach that evaluates the relevance and appropriateness of the institution's stated objectives, considering the HEI's legal and regulatory responsibilities.

Focus Area: refers to a category or domain within the institutional quality audit standards consisting of a set of related quality audit standards sharing common characteristics.

Guideline: refers to specific expectation within a standard, when met, indicates compliance with that standard.

Improvement: refers to the fourth dimension of the ADRI cycle, which focuses on how effectively an HEI is improving its approach and deployment for any given topic in order to achieve better results.

Internal Quality Assurance System (IQAS): refers to a structured framework implemented by a HEI to monitor, evaluate, and enhance the quality of its academic and administrative processes, ensuring the institution meets standards, achieves its mission, and promotes continuous improvement.



Quality: The degree to which a HEI meets established standards, guidelines, and stakeholder needs, assessed through the concepts of fitness for purpose and fitness of purpose to ensure the institution is effective and aligned with its mission.

Quality Audit: refers to a systematic and independent evaluation process that assesses whether the Internal Quality Assurance System (IQAS) established by an HEI is effective.

Quality Audit Cycle: refers to a defined period, typically occurring at five-year intervals, during which an audit is conducted.

Quality Auditors: refers to trained professionals who have been designated by the Authority to conduct quality audits in HEIs.

Quality Enhancement: refers to the process where steps are taken to bring about continuous improvements in quality.

Recommendations: refers to suggestions as a result of institutional quality audit findings aimed at enhancing the quality and effectiveness of the internal quality assurance system of an HEI.

Results: refers to the third dimension of the ADRI cycle, which focuses on the evidence of the outputs and outcomes of a topic's approach and deployment.

Self-Evaluation: refers to a systematic internal process through which an institution assesses its performance and practices against established standards, using the ADRI model to identify strengths and areas for improvement.



1. Introduction

1.1. Background

Over the past three decades, the Ethiopian government has actively reformed and expanded the public higher education sector to produce competent graduates for the labor market and encouraged private investment, resulting in a significant increase in higher education institutions. However, this rapid growth has brought challenges in ensuring quality and implementing effective quality assurance mechanisms. To address these concerns, the government established the HERQA under Proclamation No. 351/2003. HERQA's mandate included overseeing the quality and relevance of higher education in both public and private institutions. This initiative aims to uphold educational standards and align academic programs with market needs, ensuring that graduates are well-prepared for the workforce. The effectiveness of a quality assurance system directly impacts the quality of graduates, with a well-functioning system increasing the likelihood that educational outcomes meet established standards.

Quality audit was one of HERQA's key instruments for demonstrating quality improvement in higher education institutions. Despite existing legal provisions for accountability, many institutions audited by HERQA demonstrated limited responsiveness in implementing the recommendations outlined in audit reports. This gap highlighted the need for a more effective mechanism to ensure that institutions actively address quality concerns. In response, HERQA underwent significant reforms, transitioning into the Education and Training Authority (ETA) through Proclamation No. 1263/2021. Additionally, Regulation No. 515/2022 was issued by the Council of Ministers to define the Authority's structure and responsibilities. ETA has since redefined the quality audit processes, introducing a certification system for higher education institutions (HEIs) based on the functionality level of their Internal Quality Assurance Systems (IQAS).

Audits serve as a systematic approach to evaluate the quality and effectiveness of educational programs and the overall institutional performance. Thus, audits assess the capacity and capability of these systems to maintain and continuously improve the quality of educational programs. ETA's external quality audits are conducted in two distinct forms: program and



institutional. Institutional quality audits focus on evaluating the internal quality assurance systems of higher education institutions (HEIs), assessing how effectively these systems support the institutions' overall quality objectives and compliance with established standards. Program audits, on the other hand, are system-oriented evaluations that assess the effectiveness of the quality assurance processes specific to educational programs. These audits examine how well the programs' internal quality assurance system operate, ensuring that all processes from curriculum design and delivery to assessment and continuous improvement are aligned with institutional goals and industry standards.

In conclusion, ETA's redefinition of quality audit processes aims to enhance the effectiveness of internal quality assurance systems, strengthen accountability, and ensure that higher education institutions effectively address quality concerns, aligning with national standards and international benchmarks, improving overall educational quality.

1.2. Legal Framework of HEIs Quality Audit

At its inception through Proclamation No. 351/2003, the Higher Education Relevance and Quality Agency (HERQA) was tasked with ensuring that higher education and training provided by institutions met established quality standards and relevance. To fulfill this mandate, HERQA implemented two quality assurance methods: licensing and quality audits. While licensing applied only to private higher education institutions (HEIs), quality audits were conducted across all HEIs, regardless of ownership status. As a result, HERQA audited a significant number of institutions. However, many HEIs have been unresponsive to the recommendations outlined in audit reports due to a lack of accountability and limited monitoring. It has become evident that existing legal provisions regarding HEIs' responsibilities to address audit recommendations are inadequate. This situation highlighted the need for a new legal framework. Consequently, HEP No. 650/2009 was enacted, followed by Proclamation No. 1152/2019, which included specific articles outlining the quality assurance responsibilities of HEIs. Under HEP 1152/2019 (Article 21/6) and the Council of Ministers Regulation No. 515/2022, institutions are required to implement the Authority's recommendations resulting from quality audits.

Despite the establishment of legal frameworks to ensure accountability, non-compliance by HEIs persists, with institutions that fail to address audit recommendations facing no consequences. To address this issue, the Quality Audit Directive for Higher Education and Technical and



Vocational Education and Training (TVET) Institutions was introduced to oversee audit activities, emphasizing a systems-oriented quality audit approach.

1.3. Importance of Quality Audit

The Institutional Quality Audit conducted by ETA is a vital tool in fulfilling the Authority's mission and achieving its objectives of ensuring quality and relevant education and training across Ethiopia. In line with ETA's mission to foster continuously improvable internal quality assurance systems within institutions, the audit promotes enhancement by identifying both strengths and areas for improvement.

Another core purpose of ETA's quality audit is to promote accountability by holding institutions responsible for the effective use of resources and ensuring their practices align with their vision, mission, and strategic objectives. This approach aligns with ETA's mission to establish an effective quality assurance system, ensuring that institutions are accountable to their stakeholders, including students, parents, and the broader public.

Furthermore, the audit enhances transparency by providing public access to information regarding an institution's operations, governance, and outcomes. This aspect of the audit aligns with ETA's objective of disseminating information about educational standards and programs from both national and international institutions. By promoting transparency, the audit fosters trust among stakeholders and supports informed decision-making by prospective students and staff.

To further support institutions, the audit offers decision-making guidance through its findings and recommendations, assisting institutions in aligning their policies, strategic plans, and resource allocations with their mission and objectives. This approach is consistent with ETA's goal of ensuring that educational curricula and practices address Ethiopia's developmental needs, thereby enabling institutions to make informed decisions that enhance their contribution to national progress.

Through these purposes, ETA's Institutional Quality Audit ensures compliance. It also establishes a foundation for continuous improvement, accountability, and transparency. These elements are essential for achieving ETA's vision of becoming a globally recognized leader in education and training quality assurance by 2032.



1.4. Vision, Mission, Objective and Core Values of ETA

ETA's Vision is:

To be globally recognized and competent education and training quality assuring body by 2032.

Mission: The mission of the Authority is to ensure a high quality and relevant education and training by:

- Developing national quality assurance standards and ensuring their proper implementation.
- Ensuring that education and training institutions establish vibrant internal quality assurance systems that can be continuously improved.
- Ensuring that graduates of education and training institutions acquire the necessary knowledge, skills, and attitudes to facilitate the country's development and growth.

Core Values: In delivering its quality audit services, ETA is committed to upholding public accountability, professionalism, transparency, impartiality, competence, and professional integrity.

Objective

By improving the legal framework which governs education and training it will assure quality of education and training by performing activities related to education quality, monitoring, evaluation and control in the control.

1.5 Scope of the Standard

This document delineates the standards for evaluating the internal quality assurance systems of higher education institutions in Ethiopia. The primary aim is to assess the robustness and effectiveness of the HEI's internal quality assurance system rather than focusing on the adequacy and sufficiency of resources.

Ethiopian HEIs exhibit considerable diversity across various dimensions, each of which has important implications for quality assurance. This standard is uniformly applicable to all HEIs, regardless of their status, program delivery modality, institutional differentiation, or autonomy. It ensures a thorough and rigorous evaluation of each institution's quality assurance systems,



promoting uniformity while recognizing the unique contexts of different institutions. This approach fosters accountability and enhances the overall quality of higher education across the board.

The standards in this document are designed to evaluate three core aspects of an HEI's internal quality assurance system. First, the existence of the system, which looks at whether the institution has established a formal, structured quality assurance framework. Second, the functionality of the system, which evaluates how effectively the quality assurance mechanisms are implemented and operated. Finally, the ongoing improvement of the system examines whether these processes are sustainable and capable of driving long-term quality enhancement. Together, these aspects ensure that the institution's quality assurance system is not only operational but also capable of evolving over time.

2. Fundamentals of Institutional Quality Audit

A quality audit is a systematic and independent evaluation process designed to assess the effectiveness of internal quality assurance systems within HEIs. By adhering to the core concepts, approaches, and focus areas of quality audit, institutions can conduct effective self-evaluations, and ETA carries out quality audits that drive meaningful improvements and enhance overall outcomes.

2.1. ETA's Quality Audit Approach: Fitness for Purpose and Fitness of Purpose

The Authority conducts institutional quality audit in HEIs with a focus on both "fitness for purpose" and "fitness of purpose." The "fitness for purpose" approach evaluates how effectively an HEI meet the institution's stated intents, such as its mission, vision, and strategic goals. Meanwhile, the "fitness of purpose" approach goes further by assessing the relevance and appropriateness of these strategic intents, considering the HEI's legal and regulatory responsibilities. This ensures that the HEI's objectives are realistic, contextually appropriate, and not merely aspirational. Therefore, ETA's external quality audit is grounded in the principles of both fitness for purpose and fitness of purpose, ensuring that institutions are evaluated not just on their ability to meet their stated goals, but also on the relevance and appropriateness of those goals within the broader national and global context. This dual approach ensures that HEIs are



both effective in achieving their objectives and aligned with the expectations of stakeholders, including students, employers, and the government. ETA's quality audit is designed to respect the autonomy of HEIs in developing their own quality assurance systems within the national higher education framework.

ETA's quality audit does not merely assess the availability of resources; instead, it focus on the effectiveness of the systems, processes, and strategies that the institution has implemented to achieve its mission and strategic objectives. By emphasizing systemic and process effectiveness, the audit ensures a comprehensive evaluation that goes beyond surface-level resource checks, delving into how well the institution's internal mechanisms support its goals.

2.2. ETA's Quality Audit Evaluation Model: ADRI

ETA's institutional audit are conducted using the ADRI (Approach, Deployment, Results, and Improvement) model, a structured and cyclical evaluation framework that emphasizes not only how institutions plan and implement their quality assurance systems but also the results these systems produce and the mechanisms in place for continuous improvement. By employing the ADRI model, ETA ensures that HEIs are held accountable for the outcomes of their quality assurance processes and are encouraged to engage in a continuous cycle of evaluation and enhancement.

Approach: The Approach phase, also known as the planning phase, focuses on defining the goals and objectives of HEI and outlining the strategies to achieve them. This phase reflects the institution's intentions and serves as a foundation for aligning its actions with strategic priorities. In the context of a quality audit, the Approach phase evaluates the institution's overarching mission and vision as well as the detailed plans related to the specific area under review.

Deployment: Deployment assesses how effectively the institution's quality assurance system is implemented across all levels. It looks at the operationalization of policies, strategies, and frameworks within different departments. This includes examining the extent to which quality assurance processes are embedded in day-to-day activities, how roles and responsibilities are distributed, and how leadership fosters an institutional culture of quality.

Results: Assessing quality involves evaluating not only the plans, inputs, and processes but also the outcomes achieved. Results serve as crucial indicators of whether the institution's actions are



effective and aligned with its goals. Every goal should be associated with a reported result, and each result should directly relate to a specific goal. This establishes a clear causal relationship between the approach, its implementation, and the outcomes, preventing random success and enhancing the institution's understanding of how to improve future performance.

Improvement: This final dimension focuses on how the institution uses the results of its quality assurance processes to drive continuous improvement. It examines the mechanisms in place for reviewing, reflecting on, and enhancing institutional processes and outcomes. This dimension emphasizes the institution's ability to adapt, innovate, and implement changes based on internal evaluations and external feedback.

2.3. Quality Audit Focus Areas and Standards

Regulatory bodies in different countries organize their quality standards in various ways. The Authority structures its quality audit standards into seven focus areas, taking into account both the national context and international benchmarks. Each focus area serves as an overarching category, encompassing specific standards and guidelines that HEIs are required to follow. This structured approach ensures comprehensive evaluations and aligns with global best practices, promoting consistency and quality in higher education. For each guideline, detailed indicators are defined to measure the effectiveness of the internal quality assurance system. The following sections present the lists and descriptions of the focus areas, standards, and guidelines, respectively:

- 1. Vision, Mission and Governance
- 2. Infrastructure and Learning Resources
- 3. Academic and Support Staff
- 4. Student Affairs and Graduate Outcomes
- 5. Program Development and Delivery
- 6. Research, Community Engagement, Incubation and Innovation, and Industry linkage
- 7. Internal Quality Assurance



Focus Area 1: Vision, Mission and Governance

Every HEI shall have a clearly defined and relevant mission and vision as well as a governance system and structure that support the realization of its vision and mission. The governance framework, along with institutional regulations and policies, must be developed in consultation with those impacted and must adhere to legal requirements. The roles and responsibilities of the governing body at various levels and different academic committees shall be clearly defined, communicated, and understood by its stakeholders. Each staff member shall recognize how their work aligns with the HEI's mission, policies, and objectives. A clear timeline shall be established for reviewing and revising legislative documents. Processes, procedures, systems, mechanisms, and activities must be implemented, evaluated, and monitored in a structured and systematic manner. The governing body is responsible for periodically assessing their effectiveness in achieving the institution's goals.

Standard 1: Vision and Mission

The HEI shall establish clear and realistic vision, mission, and goals statements developed with the participation of stakeholders, align with the national priorities, and clearly articulate the institution's purpose. The goals and strategic objectives are aligned with the mission, approved by the governing body, and communicated to stakeholders.

Guidelines

- 1.1. Establish a mechanism to set clear and realistic vision, mission and goals aligned with the purpose it is differentiated for, national priorities and regulatory requirements, approved by concerned body, ensuring the participation of relevant stakeholders and the establishment of a communication mechanism.
- 1.2. Formulate a mechanism to ensure strategic goals and objectives emanate from its mission and align with its activities while integrating major cross cutting issues across its functional units.
- 1.3. Establish a system that enables regularly monitor and periodically evaluate its mission, vision, and core values to ensure their relevance and assess the level of attainment using KPIs.



- 1.4. Have a clear and realistic vision, mission, and goals developed with stakeholders participation, approved by the governing body, consistently reflected in all strategic documents, aligned with its differentiation and cross-cutting issues, supported by well-defined objectives and activities, effectively communicated to stakeholders, regularly monitor and periodically evaluate the attainment of its mission and vision using predefined KPIs.
- 1.5. Demonstrate measurable results that align with strategic goals and objectives, establish a causal relationship with the approach and deployment, and assess its performance against targets and trends.
- 1.6. Consistently gather, validate, analyze and report data on its strategic intents, regularly review and update its strategic and operational plans, and demonstrate tangible improvements in these areas through established review processes.

Standard 2: Governance

The HEI shall establish a governance system for effective management and implementation of policies and procedures that ensures accountability and transparency.

Guidelines

- 2.1. Establish an appropriate governance system that aligns with the institution's mission and regulatory requirements, ensuring the participation of relevant stakeholders and the establishment of a communication mechanism.
- 2.2. Define and communicate roles and responsibilities of different organs that commensurate with the required authority and establish accountable, transparent, merit based and inclusive governance system.
- 2.3. Establish a system for handling grievances, appeal and disciplinary cases.
- 2.4. Devise a risk identification and mitigation system.
- 2.5. Devise a mechanism to regularly monitor and periodically evaluate its governance system using KPIs.
- 2.6. Allocate resources, implement policies, ensure transparency and accountability, promote merit-based inclusive leadership, empower staff, handle grievances, mitigate



- risks, regularly monitor and periodically evaluate the attainment of its governance goals using pre-defined KPIs.
- 2.7. Demonstrate measurable results that align with governance goals and objectives, establish a causal relationship with the approach and deployment, and assess its performance against targets and trends.
- 2.8. Consistently gather, validate, analyze, and report data on its governance goals, regularly review and update its governance management system, and demonstrate tangible improvements in governance through established review processes.

Standard 3: Financial Management

The HEI shall establish and maintain financial management systems that ensure strategic alignment with institutional objectives and legal frameworks.

Guidelines

- **3.1.** Establish a financial management system that aligns with national regulations and international principles, ensuring the participation of relevant stakeholders and the establishment of a communication mechanism.
- **3.2.** Devise mechanisms to diversify funding sources for financial sustainability and ensure balanced budget allocation across functions with transparency and accountability in the budgeting process.
- **3.3.** Establish a mechanism to carry out internal financial audit that is in line with the national financial audit requirement.
- **3.4.** Develop a mechanism to regularly monitor and periodically evaluate the effectiveness of the financial management system using KPIs.
- **3.5.** Engage stakeholders in financial policy formulation, communicate the policy, allocate resources, ensure balanced budget allocation, diversify funding sources, conduct internal financial audit and regularly monitor and periodically evaluate the financial management system's effectiveness using pre-defined KPIs.
- **3.6.** Demonstrate measurable results that align with financial management goals and objectives, establish a causal relationship with the approach and deployment, and assess its performance against targets and trends.



3.7. Consistently gather, validate, analyze, and report data on its financial management goals, regularly review and update its financial management system, and demonstrate tangible improvements in financial management system through established review processes.

Focus Area 2: Infrastructure and Learning Resources

This focus area emphasizes systems and processes that HEIs shall establish for effective management of physical and digital infrastructure, as well as learning resources. It focuses on acquiring, utilizing, retaining, maintaining, and updating resources in alignment with the institutional mission.

Standard 4: Infrastructure and Learning Resources

The HEI shall implement systems for acquiring, utilizing, retaining, maintaining, updating and upgrading their infrastructure and learning resources.

Guidelines

- 4.1. Establish an effective asset management policy and system for acquiring, utilizing, retaining, maintaining, and updating infrastructure and learning resources, ensuring the participation of relevant stakeholders and the establishment of a communication mechanism.
- 4.2. Establish mechanisms to align learning resources with curriculum requirements and student needs, ensure accessibility, safety, and functionality of resources and facilities, comply with national health and safety regulations, and integrate emerging technology to support learning.
- 4.3. Establish an inventory management system to regularly review and improve learning facilities and resources, and develop a mechanism to periodically produce utilization reports.
- 4.4. Design a mechanism for the maintenance, calibration, and up-to-date record-keeping of learning resources, and formulate a process for regular safety inspections by certified professionals to identify and mitigate potential hazards.



- 4.5. Establish an integrated waste management system that promotes the reduction, reuse, and recycling of waste ensuring the proper disposal of hazardous, recyclable and organic waste in compliance with environmental regulations.
- 4.6. Devise a mechanism to digitalize its core and support functions
- 4.7. Develop a mechanism and evaluation processes to regularly monitor and periodically evaluate the effectiveness of infrastructure and learning resources management system using KPIs.
- 4.8. Allocate resources for asset management, involve stakeholders in policy formulation, communicate its asset management policy to stakeholder, ensure safe and functional facilities, integrate emerging technologies, align resources with curriculum and students needs and regularly monitor and periodically evaluate its ILRM system using pre-defined KPIs.
- 4.9. Demonstrate measurable results that align with infrastructure and learning resources management goals and objectives, establish a causal relationship with the approach and deployment, and assess its performance against targets and trends.
- 4.10. Consistently gather, validate, analyze, and report data on its ILRM system goals and regularly review and update its ILRM system and demonstrate tangible improvements in ILRM system through established review processes

Focus Area 3: Academic and Support Staff

To achieve its strategic goals, each HEI is required to establish a comprehensive Human Resource Management (HRM) system encompassing recruitment, selection, appointment, promotion, and termination processes. This system provides clear guidance on staffing practices, ensuring that hiring decisions are based on competence and qualifications. Policies must clearly define the required education and experience for staff members in alignment with their responsibilities. Additionally, the HEI shall conduct regular assessments of its HR needs.

Standard 5: Academic and Support Staff

The HEI shall establish and maintain HRM system addressing recruitment, selection, appointment, promotion, and termination to provide clear guidance on staffing.

Guidelines



The HEI shall:

- 5.1. Develop HRM policy that aligns with regulatory policies, ensuring the participation of relevant stakeholders and the establishment of a communication mechanism.
- 5.2. Devise a system to conduct periodic human resource needs analysis and staff retention.
- 5.3. Develop a professional development and capacity-building plan for its academic and support staff and implement a fair and transparent performance evaluation and appraisal system.
- 5.4. Devise a mechanism that promotes inclusiveness in its HRM system.
- 5.5. Devise a procedure for handling disciplinary cases, and a fair and transparent appeal system with clearly defined procedures.
- 5.6. Establish a mechanism to regularly monitor and periodically evaluate the effectiveness of HRM system using KPIs.
- 5.7. Align HRM policies with its mission, analyze HR need, appoint and promote staff, conduct inductions, provide professional development for academic staff, communicate policies and roles, implement a staff retention plan, regularly monitor and periodically evaluate performance against pre-defined KPIs, and offer capacity-building.
- 5.8. Promote inclusiveness in recruitment, address disciplinary and appeal cases, communicate the code of conduct, collect feedback, and regularly monitor and periodically evaluate its HRM system using pre-defined KPIs.
- 5.9. Demonstrate measurable results that align with HRM goals and objectives, establish a causal relationship with the approach and deployment, and assess its performance against targets and trends.
- 5.10. Consistently gather, validate, analyze, and report data on its HRM goals, regularly review and update its HRM system, and demonstrate tangible improvements in HRM system through established review processes.

Focus Area 4: Student Affairs and Graduate Outcomes

To ensure effective management of admissions and student support services, HEIs must implement comprehensive policies, mechanisms, and procedures that align admission requirements with program standards and government regulations, while also establishing a



system that delivers a wide range of academic and non-academic support services to address the specific needs of its students.

Standard 6: Student Admission

The HEI shall have a system and a well-defined student admission policy that addresses criteria for program admission requirements and regulatory policies.

Guidelines

- 6.1. Develop student admission policy that addresses admission requirements while considering diversity, aligning with regulatory requirements, ensuring the participation of relevant stakeholders and establishing a communication mechanism.
- 6.2. Develop a system to verify student credentials and admission endorsements while integrating Student Information Management System (SIMS) with the national Education Assessment and Examination Service database.
- 6.3. Create a system to ensure consistent admission procedures across campuses and securely store and easily retrieve student and graduate records.
- 6.4. Establish an appeal system with a clear procedure for student admission.
- 6.5. Establish a mechanism to regularly monitor and periodically evaluate its student admission management system using KPIs.
- 6.6. Involve stakeholders in admission policy formulation, communicate policy, allocate resources for student admission activities, verify credentials follow admission requirements and admit students from diverse and special need backgrounds.
- 6.7. Ensure consistent admission procedures across campuses, utilized the integrated EAES and SIMS, securely store credentials with backup mechanisms, handle student appeals, and regularly monitor and periodically evaluate the system's effectiveness based on pre-defined KPIs.
- 6.8. Demonstrate measurable results that align with student admission management system goals and objectives, establish a causal relationship with the approach and deployment, and assess its performance against targets and trends.
- 6.9. Consistently gather, validate, analyze, and report data on its student admission goals, regularly review and update its student admission management system, and



demonstrate tangible improvements in student admission management system through established review processes.

Standard 7: Student Support Service

The HEI shall establish and implement a well-defined policy, system, and procedures for its academic and non-academic support services, ensuring that students are enabled to achieve the program objectives.

Guidelines

- 7.1. Establish an inclusive student support service policy and procedure that aligns with regulatory requirements, ensuring the participation of relevant stakeholders and the establishment of a communication mechanism.
- 7.2. Devise a student retention mechanism to minimize attrition and improve national exit exam success, while addressing support needs through academic advising, extracurricular services, healthcare, counseling, and career training.
- 7.3. Establish a mechanism for grievance and appeal on students support services.
- 7.4. In place a mechanism to regularly monitor and periodically evaluate the effectiveness of its student support services management system using KPIs.
- 7.5. Involve relevant stakeholders in policy formulation, communicate its students support service policies, allocate resources for student support activities including academic advising, extracurricular activities, healthcare, counseling, career training, and manage grievances and appeals.
- 7.6. Regularly monitor and periodically evaluate its student support services using predefined KPIs.
- 7.7. Demonstrate measurable results that align with students support service goals and objectives, establish a causal relationship with the approach and deployment, and assess its performance against targets and trends.
- 7.8. Consistently gather, validate, analyze, and report data on its student support service goals, regularly review and update its student support service management system, and demonstrate tangible improvements through established review processes.



Standard 8: Students Progression and Graduate Outcomes

The HEI shall establish a comprehensive system and procedure to effectively monitor student progression and identify individuals requiring support, with the aim of reducing dropout rates and enhancing graduate outcomes. This system shall involve the regular collection and analysis of data related to student admissions, progression, and graduate outcomes to track employment trends.

Guidelines

- 8.1. Develop a policy that governs student progression and graduate outcomes in alignment with regulatory requirements, ensuring the participation of relevant stakeholders and the establishment of a communication mechanism.
- 8.2. Develop a system that tracks students' progress, including course enrollment and grade earned to ensure timely identification of students' academic progression.
- 8.3. Establish a mechanism to conduct tracer studies to evaluate graduate effectiveness and program outcomes, and develop a system to maintain continuous relationships with alumni.
- 8.4. Establish an appeal system regarding students' progression
- 8.5. In place a system to regularly monitor and periodically evaluate the effectiveness of student progression and graduate outcome management system using KPIs.
- 8.6. Involve stakeholders in student progression and graduate outcome policy formulation, communicate the policy, and use a tracking system for identifying at-risk students.
- 8.7. Conduct tracer studies, engage alumni in institutional initiatives, survey alumni career progression, analyze alumni engagement, communicate and deploy appeal procedures regarding student progression and regularly monitor and periodically evaluate the students' progression and graduate outcome system's effectiveness based on predefined KPIs.
- 8.8. Demonstrate measurable results that align with goals and objectives related to students progression and graduate outcomes, establish a causal relationship with the approach and deployment, and assess its performance against targets and trends.



8.9. Consistently gather, validate, analyze, and report data on the attainment of goals related to student progression and graduate outcomes, regularly review and update its student progression and graduate outcomes management system, and demonstrated tangible improvements through established review processes.

Focus Area 5: Program Development and Delivery

The HEI shall put in place and implement a planned and robust procedure for program design, development, approval, and review in order to maintain program relevance, quality, and alignment with the national framework. The HEI also shall make sure that the program delivery is in line with the curricula.

Standard 9: Program Development and Review

The HEI shall establish and implement a robust system for its programs design, development, approval and review.

Guidelines

- 9.1. Develop a policy and guideline for program design, development, approval and revision that align with regulatory requirements and national priority, ensuring the participation of relevant stakeholders and the establishment of a communication mechanism.
- 9.2. Develop a program needs assessment guideline that aligns with national priorities, incorporates indigenous knowledge and 21st century skills, and includes a mechanism for continuous improvement through feedback obtained from tracer studies.
- 9.3. Establish a procedure to ensure that the necessary resources to operate academic programs are secured in advance.
- 9.4. Establish a mechanism to regularly monitor and periodically evaluate its program development and revision system using KPIs.
- 9.5. Implement its program design, development, approval, and revision policy and guidelines by involving relevant stakeholders, aligning with national priorities and tracer study results, communicate its program design, development and revision guideline to its relevant stakeholders, conducted a program needs assessment based on the guideline and integrated indigenous knowledge and 21st C skills, and ensure



- sufficient resources are available to effectively operate academic programs, regularly monitor and periodically evaluate the effectiveness of its program development and revision system using pre-defined KPIs.
- 9.6. Demonstrate measurable results that align with program development and review goals and objectives, establish a causal relationship with the approach and deployment, and assess its performance against targets and trends.
- 9.7. Consistently gather, validate, analyze, and report data on program development and review goals, regularly update its program development and review management system, and demonstrate tangible improvements through established processes.

Standard 10: Learning and Teaching

The HEI shall establish and put in to practice clear policies and procedures that govern the overall learning and teaching process.

Guidelines

- 10.1. Develop a comprehensive learning and teaching policy and guideline considering regulatory requirements and different modes of delivery, ensuring the participation of relevant stakeholders and the establishment of a communication mechanism.
- 10.2. Develop a mechanism to equip faculty with pedagogical skills and establish a technology-assisted learning process.
- 10.3. Establish a mechanism that enables to check the use of variety of teaching methods that fit the nature of the course content and learning outcomes which are appropriate for the mode of delivery.
- 10.4. Create a mechanism to ensure comprehensive course content coverage and maintain a balance between theory and practice in course delivery.
- 10.5. Establish a system to regularly monitor and periodically evaluate the effectiveness of the learning and teaching management system using KPIs.
- 10.6. Involve stakeholders in the development of the learning and teaching policy; communicate the policy; equip faculty with pedagogical skills; ensure course content coverage that maintains a balance between theory and practice; monitor the implementation of diverse active learning methods suited to the course nature, delivery



modality, and technology used; ensure that course content, teaching methods, and learning outcomes are consistent and complementary; regularly conducted trainee and staff satisfaction survey on its learning teaching management system and communicated to its stakeholder and regularly monitor and evaluate the system's effectiveness based on predefined KPIs.

- 10.7. Demonstrate measurable results that align with learning and teaching goals and objectives, establish a causal relationship with the approach and deployment, and assess its performance against targets and trends.
- 10.8. Consistently gather, validate, analyze, and report data on learning and teaching goals, regularly update its learning and teaching management system and demonstrate tangible improvements through established processes.

Standard 11: Student Assessment

The HEI shall establish assessment system to measure student's achievement of learning outcomes with clear and effective procedure for its implementation.

Guidelines

- 11.1. Develop a comprehensive assessment policy considering regulatory requirements and different modes of delivery, ensuring the participation of relevant stakeholders and the establishment of a communication mechanism.
- 11.2. Develop a mechanism to ensure the use of diverse methods and guarantee the validity and reliability of assessment.
- 11.3. Establish a mechanism to support assessments with technology and develop procedures to ensure the security, fairness, and consistency of exam handling.
- 11.4. Create a mechanism to ensure assessments cover the entire course content, maintain a balance between theory and practice, and align assessment with course objectives and learning outcome.
- 11.5. Establish a mechanism to ensure consistency of assessment practices across the institution.
- 11.6. In place an appeal system for grievance handling related to assessment and marking.



- 11.7. Devise a mechanism to regularly monitor and periodically evaluate the effectiveness of assessment system using KPIs.
- 11.8. Involve stakeholders in developing assessment policies, communicate the policy, allocate resources, ensure alignment between course content, assessment methods, and learning outcomes, ensure assessments covered the entire course objectives, course content and balance between theory and practice is maintained, support assessment with technology, and monitor security, consistency, fairness, validity and reliability of assessment, monitor consistency of assessment practices across its departments and campuses, while addressing grievances and regularly reviewing the effectiveness of the system using pre-defined KPIs.
- 11.9. Demonstrate measurable results that align with student assessment goals and objectives, establish a causal relationship with the approach and deployment, and assess its performance against targets and trends.
- 11.10. Consistently gather, validate, analyze, and report data on student assessment goals, regularly update its student assessment system, and demonstrate tangible improvements through established processes.

Focus Area 6: Research, Community Engagement, Industry Linkage and Incubation and Innovation

HEIs are expected to engage in research and community activities alongside their teaching responsibilities. While all HEIs are required to conduct research, the extent of their involvement may vary based on their specific mission and focus. To effectively fulfill these roles, it is essential to establish clear policies, guidelines, and systems that support these activities. This focus area outlines the necessary standards and guidelines for the systems and procedures required to enhance and maintain the quality of research, community engagement, and industry partnerships. By implementing these frameworks, HEIs will ensure they meet their obligations and make meaningful contributions to their communities and academic disciplines.



Standard 12: Research

The HEI shall in place a system for research undertakings ensuring national priorities, institutional mission and stakeholder expectation.

Guidelines

- 12.1. Develop research policies that align with its mission, national priority and regulatory requirements, ensuring the participation of relevant stakeholders and the establishment of a communication mechanism.
- 12.2. Develop a mechanism to identify and prioritize research thematic areas ensuring consistent and stringent research approval process.
- 12.3. Establish a mechanism to secure research funding and ensure it is exclusively used for research purposes.
- 12.4. Establish mechanisms to support, monitor, and evaluate both student and staff research activities, including incentives to promote engagement.
- 12.5. Create a database for managing and archiving research output, a process for publication and dissemination and a mechanism to prevent plagiarism.
- 12.6. Establish a mechanism to verify the reputability of journals before subscription and create a system for collaboration with national and international institutions.
- 12.7. In place a system to periodically evaluate the impacts of its research outputs.
- 12.8. In place an appeal system for grievances handling related to research undertakings.
- 12.9. Develop a system to regularly monitor and periodically evaluate the effectiveness of its research management system using KPIs.
- 12.10. Develop and communicate research policies, allocate resources, prioritize research themes, ensure ethical standards, support and monitor staff and students' research, diversified funding sources, and ensured research funds are used exclusively for research activities, deploy a database system, publish research output, collaborate with institutions, subscribe reputable journals, checked plagiarism and maintained ethical standards in its research approval procedures, assessed research impact, and regularly



- monitor and periodically evaluate the research management system using pre-defined KPIs.
- 12.11. Demonstrate measurable results that align with research goals and objectives, establish a causal relationship with the approach and deployment, and assess its performance against targets and trends.
- 12.12. Consistently gather, validate, analyze, and report data on research goals, regularly update its research management system, and demonstrate tangible improvements through established processes.

Standard 13: Community Engagement

The HEI shall establish a system for community engagement ensuring national requirements, institutional mission, social responsibility and stakeholder expectation.

Guidelines

- 13.1. Establish community engagement policies in alignment with the mission it is differentiated for, national priorities and regulatory requirements, ensuring the participation of relevant stakeholders and the establishment of a communication mechanism.
- 13.2. Create a system to encourage community involvement in institutional committees and build the institution's credibility.
- 13.3. Establish a mechanism to engage its staff and students to participate in a range of community activities and national services.
- 13.4. Devise a mechanism to support community engagement activities by research.
- 13.5. Devise a system to periodically evaluate the impacts of its community engagement activities.
- 13.6. In place a mechanism to regularly monitor and periodically evaluate the effectiveness of its community engagement management system using KPIs.
- 13.7. Develop a community engagement policy with stakeholder involvement, communicate it, allocate resources, engage staff and students in community service, build credibility, encourage research-based engagement, assess impact, and regularly monitor and periodically evaluate the system's effectiveness using pre-defined KPIs.



- 13.8. Demonstrate measurable results that align with community engagement goals and objectives, establish a causal relationship with the approach and deployment, and assess its performance against targets and trends.
- 13.9. Consistently gather, validate, analyze, and report data on attainment of community engagement goals, regularly update its community engagement system, and demonstrate tangible improvements through established processes.

Standard 14: Industry Linkage

The HEI shall in place a system for industry linkage ensuring national priorities, regulatory requirements, institutional mission and stakeholders' expectation.

Guidelines

- 14.1. Develop industry linkage policies in alignment with the mission it is differentiated for, national priorities and regulatory requirements, ensuring the participation of relevant stakeholders and the establishment of a communication mechanism.
- 14.2. Develop a strategy to form local and international partnerships and diversify funding sources for industry linkages.
- 14.3. Create a mechanism to strengthen university-industry linkages, align graduate skills with industry needs, and build strong relationships to improve employability through real-world experience.
- 14.4. In place a mechanism to regularly monitor and periodically evaluate the effectiveness of its industry linkage management system using KPIs.
- 14.5. Establish industry linkage policy through stakeholder involvement, allocate resources, communicate the guidelines and procedures to stakeholders, create strategic partnerships, diversify funding, secure industry-funded research, execute internships, and conducted contextualized collaborative projects, while analyzing graduate skills and labor market trends and regularly monitored and periodically evaluate its industry linkage management system using pre-defined KPIs.
- 14.6. Demonstrate measurable results that align with industry linkage goals and objectives, establish a causal relationship with the approach and deployment, and assess its performance against targets and trends.



14.7. Consistently gather, validate, analyze, and report data on the attainment of industry linkage goals, regularly update its industry linkage management system, and demonstrate tangible improvements through established processes.

Standard 15: Incubation and Innovation

HEIs shall establish and implement systems and mechanisms to nurture incubation and entrepreneurship, linking training with innovation to enhance job creation.

Guidelines:

HEIs shall:

- 15.1. Develop an Incubation and Innovation policy aligned with national priority, ensuring the participation of relevant stakeholders and the establishment of a communication mechanism.
- 15.2. Establish Entrepreneurship and Innovation Centers (EICs) to evaluate, support, and provide resources, mentorship, and training for innovative ideas and startups.
- 15.3. Develop a mechanism to integrate innovation and indigenous knowledge into the curriculum, promoting a culture of entrepreneurship among staff and trainees.
- 15.4. Formulate a mechanism to ensure that EICs provide training and support to researchers, innovators, and entrepreneurs in areas such as ideation and innovation, prototyping and design, business development, and commercialization.
- 15.5. Develop metrics to assess incubation success, including the number of startup launches, sustainability, and track progress with periodic reviews of incubates' development.
- 15.6. Establish partnerships with external experts and investors to provide funding and support, and create a mechanism to offer technical and advisory services to small and medium-sized enterprises (SMEs) through business incubation centers.
- 15.7. Devise a mechanism to disseminate best practices of innovation to promote a culture of innovation
- 15.8. Devise a mechanism to protect Intellectual Property Rights (IPR) arising from innovation, ensuring transparency and equitable sharing of benefits among stakeholders



- 15.9. Devise a mechanism to regularly monitor and periodically evaluate the effectiveness of its incubation and innovation management system using KPIs.
- 15.10. Develop Incubation and Innovation policy through stakeholder involvement; communicate the policy to stakeholders, allocate resources, transform ideas into innovation, provide training and support to students and entrepreneurs, promote indigenous knowledge, track and measure the progress and success of incubated initiatives, offer SME technical and advisory services, partner with industry experts and investors, disseminate best practices, and regularly monitor and periodically evaluate its Incubation and innovation management system using pre-defined KPIs.
- 15.11. Demonstrate measurable results that align with Incubation and innovation goals and objectives, establish a causal relationship with the approach and deployment, and assess its performance against targets and trends.
- 15.12. Consistently gather, validate, analyze, and report data on Incubation and innovation goals, regularly update its incubation and innovation management system, and demonstrate tangible improvements through established processes.

Focus Area 7: Internal Quality Assurance

The effectiveness of a quality assurance system is an important factor that influences the quality of graduates. It is widely recognized that a robust quality assurance system increases the likelihood that educational outcomes meet established standards. By implementing comprehensive quality assurance processes, HEIs can enhance their educational programs and better prepare graduates for their future careers. HEIs must establish mechanisms and procedures to ensure the effectiveness and continuous improvement of their quality assurance systems, safeguarding the quality of their educational programs. The quality assurance and improvement strategy applies to all aspects of the institution and its activities. To support quality enhancement and facilitate external verification through institutional quality audits, HEIs are expected to conduct periodic self-evaluations.

Standard 16: Internal Quality Assurance System

HEI shall establish comprehensive quality assurance policies, systems, mechanisms, processes, and procedures, actively engaging its internal stakeholders in various quality assurance activities. Additionally, the HEI shall periodically evaluate the effectiveness of its quality assurance



systems, mechanisms, processes, and procedures to ensure the continuous quality enhancement of its educational provisions.

Guidelines

- 16.1. Establish quality assurance policies aligned with the institution's mission, and regulatory requirements, ensuring the participation of relevant stakeholders and the establishment of a communication mechanism.
- 16.2. Establish a quality assurance structure ensuring decision-making autonomy and set up a quality care committee at the institutional, faculty, and program levels.
- 16.3. Establish a comprehensive quality assurance system, mechanism, procedure and process fully integrated across all institutional functions (core, support, control, strategic, operational, and cross-cutting) that ensures institutional quality, enhancement, and continuous improvement.
- 16.4. Establish a mechanism for periodic self-evaluation of the internal Quality Assurance System, address identified gaps, and ensure consistency in implementation across campuses, faculties, and programs.
- 16.5. Establish a mechanism to regularly monitor and periodically evaluate the effectiveness of its internal quality assurance systems to ensure achievement of the intended purpose using KPIs.
- 16.6. Involve stakeholder in formulating internal quality assurance policies, allocate resources, enforce quality standards, conducts internal audits, integrate the system into core, support, control, strategic, operational and cross- cutting functions, and deploy a quality committee structure at all levels, implement its quality assurance policies, systems, mechanisms, and procedures across its campuses, faculties and programs consistently, regularly monitored and periodically evaluated the effectiveness of its internal quality assurance system using pre-defined KPIs.
- 16.7. Demonstrate measurable results that align with internal quality assurance goals and objectives, establish a causal relationship with the approach and deployment, and assess its performance against targets and trends.



16.8. Consistently gather, validate, analyze, and report data on internal quality assurance goals, regularly update its internal quality assurance system, and demonstrate tangible improvements through established processes.

3. An overview of ETA's Quality Audit Procedures

The quality audit process adheres to a structured sequence of steps. The audit process includes thorough pre-audit preparations and detailed on-site visits to validate the self-evaluation report. Following the audit and subsequent evaluation, ETA publishes a public report highlighting the effectiveness of the higher education institution's internal quality assurance systems. The following overview outlines the core elements of the quality audit procedures.

3.1. Preparation Phase

Initiation of the Quality Audit Process

The quality audit process can be initiated either by ETA or by HEIs. In both cases, HEIs are required to conduct a self-evaluation and submit a Self-Evaluation Report (SER). This SER serves as the foundation for the institutional quality audit. HEIs must prepare their SER in accordance with the guidelines outlined in the ETA Institutional Self-Evaluation Manual. Once the self-evaluation is complete, the HEI submits the SER to ETA for review. For more details, refer to "ETA's Quality Audit Procedure Manual."

Self-Evaluation Report Review and Validation Process

Upon receiving the SER from institutions, ETA conducts a comprehensive review to ensure the SER's compliance with the Self-Evaluation Manual and alignment with the ADRI-based evaluation model. ETA initiates this process by distributing the SER to a review committee formed by the Quality Audit Department. The committee then prepares a SER scrutiny report. If deficiencies are identified, the report outlines specific areas for improvement. Finally Quality Audit Department review and approves the SER scrutiny report before it is communicated to the institution. "For more details refer ETA's institutional Quality Audit Procedure manual."

The Portfolio Meeting

The Portfolio Meeting is a crucial event in the preliminary phase of quality audit process, conducted prior to the Audit Visit. The primary objectives of this meeting is to provide



orientation and clarify roles, review preliminary comments on the SER, select programs for sample review, request additional information, and determine the campuses to be included in the audit visit. Moreover, the meeting facilitates the planning of interviews and focus group discussions (FGDs). The Meeting is held either face-to-face at ETA offices or virtually. For more details refer to "ETA's Institutional Quality Audit Procedure Manual."

The Briefing Visit

Once the date for audit visit has been set ETA conducts a briefing visit to the HEI. The visit normally lasts for one day. The ETA team will expect to meet with the president, the key staffs responsible for quality assurance, some deans and heads of department, staff and student representatives. The primary purpose of the briefing visit is to explain the audit procedures to the HEI community and answer any queries. ETA will also clarify its requirements for the quality audit visit. For more details, refer to "ETA's Institutional Quality Audit Procedure Manual."

3.2. The Quality Audit Visit

It begins with a formal meeting between the Audit Panel and the institution's leadership. During the visit, the panel conducts various key activities including document review, FGDs and interviews. These activities are designed to verify the information presented in the SER and to ensure the alignment of the institution's quality assurance processes with quality audit standards. Throughout the process, the panel maintains a positive and collaborative approach, fostering an atmosphere of mutual respect. For more details, refer to "ETA's Institutional Quality Audit Procedure Manual."

3.3. Post Audit phase

Quality Audit Report

Following an audit visit, ETA's Audit Panel drafts report summarizing its findings, including commendations for areas exceeding standards and recommendations for improvement. The draft audit report is shared with the HEI for verification before public release. The HEI must submit a quality enhancement plan addressing the recommendations and outlining additional improvement actions and finally ETA conducts a follow-up audit to evaluate progress and amend the report accordingly. After verification of the final audit report by the HEI, the report will be published. For more details, refer to "ETA's Institutional Quality Audit Procedure Manual."



3.4 Determining the performance level of Internal Quality Assurance systems of HEIs

Qualitative Assessment Method of Determining Compliance level

- Fully Compliant: The HEI's internal quality assurance system is considered "Fully Compliant" with a specific guideline of a quality audit standard when all ADRI indicators for that guideline are met.
- Compliant: The HEI's internal quality assurance system is deemed "Compliant" with a specific guideline of a quality audit standard when the majority of ADRI indicators for that guideline are met.
- Non-Compliant: The HEI's internal quality assurance system is classified as "Non-Compliant" with a specific guideline of a quality audit standard when the majority of ADRI indicators for that guideline are unmet.

Qualitative Assessment Method of Determining Functionality level

Based on the effectiveness of their internal quality assurance system, audited institutions are classified into three levels: "Fully Functional", "Functional" and "Minimally Functional." The results shall be communicated through certification.

- Fully Functional: When most of the quality audit guidelines outlined under each quality audit standard are "Fully Compliant" and only a few guidelines are "Compliant", the internal quality assurance system level of the higher education or technical and vocational training institution where the quality audit was conducted shall be "Fully Functional"
- Functional: When most of the quality audit guidelines outlined under each quality audit standard are "Compliant" and only a few quality audit guidelines are "Non-compliant," the level given to the internal quality assurance system of the higher education or technical and vocational training institution where the quality audit was conducted shall be considered as "Functional"
- **Minimally Functional**: When the majority of the quality audit guidelines outlined in each quality audit standard are "Non-compliant", the level given to the internal quality assurance system of the higher education or technical and vocational training institution where the quality audit was conducted shall be considered as "Minimally Functional".



Certification: The quality audit performance level certificate given to audited institutions shall be represented in three colors: green for institutions with a "Fully Functional" internal quality assurance system, yellow for those with a "Functional" quality assurance system, and red for institutions with a "Minimally Functional" internal quality assurance system.

Disputes and Appeals

The institution is given the opportunity to review the draft Quality Audit Report and provide formal feedback to ETA. If the HEI identifies significant inaccuracies or unfair representations that may adversely affect its reputation, it has the right to appeal. Grounds for appeal include major factual inaccuracies that have not been addressed; biased reporting that presents an unbalanced view of the institution; omission of critical issues that negatively impact the HEI; or deviations from established audit protocols that result in an unfair audit process. For more details, refer to "ETA's Institutional Quality Audit Procedure Manual."

3. Standard development and Review Protocol

The standard was developed following a structured approach. It began with a comprehensive review of the pertinent legal frameworks, including the Higher Education Proclamation No. 1152/2019 and Regulation No. 515/2022 to ensure full compliance with national requirements. Moreover, international standards were thoroughly analyzed to align the new standard with recognized benchmarks. A dedicated working group comprising Quality audit CEO, desk heads and experts were established for the development of the standard. The draft underwent an indepth internal review, followed by a public consultation to collect feedback. The finalized standard is designed to undergo an annual review and will be comprehensively evaluated every five years to maintain its relevance and alignment with evolving legal and quality assurance expectations.



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